PATENT APPLICATION SEE DETERMINATION RECORD Effective December 8, 2004

Application or Docket Number 10/526292

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	لموه.		SMALL EN	πγ		OTHER	THAN					
			(0	Column 1)	1	(Column 2)		TYPE		OR		
U.S	. NATIONAL	STAGE FEES	19					RATE	FEE	1	RATE	FEE
BASIC FEE			SMALL ENT. = \$ 150		LARGE ENT. = \$ 300			BASIC FEE		OR	BASIC FEE	300
EXAMINATION FEE			Salislies PCT Article 33(1)- (4) = \$50/\$ 100		All other situations = \$ 100 / \$ 200			EXAM. FEE		1	EXAM FEE	20
SEARCH FEE			U.S. is ISA = \$50 / \$ 100 ALL other countries = \$ 200 / \$ 400		All other situations = \$ 250 / \$ 500			SEARCH FEE	,		SEARCH FEE	400
FEE FOR EXTRA SPEC. PGS.			minus 100 =		/ 50 =			X \$ 125 =		1	X \$ 250 =	
TOTAL CHARGEABLE CLAIMS			10	minus 20 =	•			X \$ 25 =		OR	X \$ 50 =	
INDEPENDENT CLAIMS				minus 3 =	•			X \$ 100 =		OR	X \$ 200 =	
MUL	TIPLE DEPEN	DENT CLAIM PR	ESENT	N				+\$ 180 =		OR	+ \$ 360 =	
• H	the difference	in column 1 is	olumn 2	_ `	TOTAL		OR	TOTAL	900			
CLAIMS AS AMENDED - PART II											OTHER	
	¥	(Column 1)		(Cotu		(Column 3)		SMALL E	NTITY	OR	SMALL E	HTITY
AMENDMENT A	3/1/05	REMAINING AFTER AMENDMENT		MUM PREVK PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	/	RATE	ADDI- TIONAL FEE
	Total	19	Minus	-2	0	2	\prod	X \$ 25 =		OR	X\$50=	
	Independent	• \	Minus	··· (3	3	8		X \$ 100 =	/	OR	X \$ 200 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+\$ 180 =		OR	+\$360=	
	ı i			·-				TOTAL ADDIT.		OR	TOTAL ADDIT. FEE	
	1/0./00									7	rec (
- [1102/03	(Column 1)		(Colum	nn 2)	(Column 3)	_	•			•	
AMENDMENT 0		CLABAS REMAINING AFTER AMENDMENT		HIGH RUMA PREVIO PAID	Ber Jusly	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE .	ADDI- TIONAL FEE
	Total	• 17	Minus	- 9	a	s .		X \$ 25 =		OR	X \$ 50 =	
	Independent	• /	Minus	***	7	3		X \$ 100 =		OR	X \$ 200 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDEN			DEPEND ENT	CLAIM			+ \$.180 =		OR	+ \$ 360 =	_
				TOTAL ADDIT.		OR	YOTAL ADDIT.					
•	if the entry in colu	mn 1 is less than the	entry in col	luma 2, write "O" t	n column	13.						
		imber Previously Pai imber Previously Pal										
		nber Previously Paid					d in the	appropriate box	in column 1.			